

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IC NO.	DATE
FEE DETERMINATION	<i>HL</i>	<i>18</i>	<i>7-6-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>MB</i>	<i>901</i>	<i>08/17/01</i>
RESPONSE FORMALITY REVIEW	<i>ck</i>	<i>1109</i>	<i>11-09-01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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503/0101

DC 816  
 08/17/01  
 11-9-01